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SECTION: BREASTFEEDING PROMOTION AND SUPPORT

SUBJECT: Peer Counseling

ITEM: Program Requirements



Policy

Local agencies that receive USDA funds targeted for breastfeeding peer counseling, shall incorporate the following minimum requirements into the design, implementation, enhancement and/or maintenance of their peer counselor programs.

Authority

USDA All States Memorandum 04-27, "Breastfeeding Peer Counseling Grants/Training" (April 8, 2004)

"Using Loving Support to Manage Peer Counseling Programs" training curriculum: Breastfeeding Peer Counseling (2004-2005)

Minimum requirements

I. Characteristics of Peer Counselor:

Local agencies utilizing USDA funds for breastfeeding peer counselor programs shall ensure all peer counselors meet the following criteria:

- are paraprofessionals, without extended professional training;
- have good communication skills;
- have breastfed a child;
- are enthusiastic about breastfeeding and have a desire to share that enthusiasm;
- are selected from the group to be served;
- are fluent in the language of the WIC participants they counsel; and
- can communicate with the peer counselor program staff or have translations services available.

II. Staffing:

Designate a peer counselor program manager/coordinator, and ensure program includes 0.25 full time equivalent (FTE) supervisor and 0.25 FTE International Board Certified Lactation Consultant [IBCLC] for every 4 peer counselors regardless of FTE of peer counselor. If the IBCLC is also the supervisor, the minimum requirement is 0.5 FTE.

III. Job Parameters:

The local agency shall:

 develop job descriptions for peer counselor program team including a supervisor, IBCLC, and peer counselor;

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- ensure peer counselors are available outside of normal WIC clinic hours and WIC environment; and
- Have State-approved protocols for:
 - o referring WIC clients to peer counselors;
 - o frequency and timing of peer counselor contacts;
 - settings where peer counselors provide services (e.g. telephone calls from home, the WIC office, hospital and/or home visits);
 - referring WIC clients to appropriate lactation specialists (breastfeeding problems outside the peer counselor's scope of work); and
 - referring WIC clients to community services as needed (consistent with minimum referrals required to be given by WIC counseling staff.)

IV. Compensation/Reimbursement:

Pay peer counselors at least 80% of a paraprofessional's entry level salary (but not less than minimum wage), and reimburse peer counselors for local agency approved telephone and travel expenses.

V. Training:

- A. Provide peer counselors with:
 - initial State approved breastfeeding training (minimum 20 hours);
 - procedures for documenting client contacts;
 - monthly breastfeeding education at regularly scheduled meetings;
 - annual State required training, i.e., civil rights, etc.;
 - orientation to WIC services and referrals (internal and external);
 and
 - local WIC/ "Parent Agency" orientation including breast pump policies.
- B. Ensure that peer counselors demonstrate competency in the following areas:
 - counseling
 - documentation
 - referrals
- C. Ensure that the designated peer counselor coordinator, manager, or supervisor receives training in how to manage peer counseling programs through "Using Loving Support to Manage Peer Counseling Programs" training curriculum.
- D. Ensure that WIC staff:
 - are trained in basic breastfeeding support;
 - receive a Power Point training about the role of the WIC peer counselor which is "Peer Counseling: Making a Difference for WIC

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Families" included in the "Using Loving Support to Manage Peer Counseling Programs;" and

are familiar with the local agency's peer counselor services.

VI. Monitoring:

At least monthly ensure:

- designated staff conduct regular Quality Assurance (QA) to ensure documented contacts occurred and peer counselors provided appropriate counseling; and
- · client contact logs are reviewed.

VII. Documentation:

- A. Ensure peer counselors document all client contacts utilizing a local agency specific system (i.e. client contact log, narrative summary) with enough information to facilitate continuity of care.
- B. All client contacts shall be documented in English unless a system is in place for the supervisor or IBCLC to understand written peer counselor records.
- C. Document the required codes in the Integrated Statewide Information System (ISIS):
 - · for all participants with a peer counselor; and
 - for all participants who have contact with an IBCLC.
- D. Submit reports to the WIC Branch as required.

VIII. Peer Counselor Support:

Ensure peer counselors have:

- access to an IBCLC:
- regular weekly contact with their supervisor (in person or on the phone);
- regular biweekly opportunities to meet with fellow peer counselors;
- the necessary resources (e.g., Peer Counselor Training Manual;) and
- the opportunity to participate in WIC staff meetings on a regular basis.

IX. Confidentiality:

Ensure all peer counselor program staff:

- adhere to WIC confidentiality requirements.
- have signed the Employee Security Affidavit (ESA) (WPM-WIC 190-20).

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X. Community Partnerships:

- A. Establish community partnerships to enhance the peer counselor program to:
 - promote the peer counselor program;
 - · establish a continuum of breastfeeding care and support; and
 - provide referrals to the WIC program.
- B. Establish Memorandums of Understanding with other entities/programs, if funds are used to train and pay their staff as peer counselors for WIC clients.

Recommended practices

Recommended I. Peer counselors:

Select peer counselors that:

- are current or previous WIC participants.
- have breastfed for at least six months.

II. Job Parameters:

Ensure peer counselors:

- utilize the contact frequency recommendations in the "Using Loving Support to Manage Peer Counseling Programs" training curriculum;
- provide one-on-one counseling with mothers at the WIC site; and
- participate in WIC breastfeeding support group meetings.

III. Training/Support:

Provide peer counselors with opportunities for continuing education through attendance at breastfeeding conferences/seminars.

IV. monitoring:

Ensure designated staff conduct **weekly** QA to ensure documented contacts occurred and peer counselors provided appropriate counseling.

Best practices

I. Job Parameters:

Peer counselors conduct:

- home visits; and
- hospital visits.

II. Compensation/ Reimbursement

Provide peer counselors with regular employee benefits.

III. Support:

Provide peer counselors with:

breastfeeding resource materials in the language spoken by the

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peer counselor;

- opportunities to shadow or observe other peer counselors and IBCLCs;
- career path options (e.g. training/experience to become senior level peer counselor, WIC Nutrition Assistant and/or IBCLC.)

IV. Community Partnerships:

Establish a system of early notification of infant delivery to the WIC program by hospitals so that peer counselors can make contact in the early postpartum period.

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